

**NIH CLINICAL CENTER NURSING & PATIENT CARE SERVICES**  
**CRN POC COMPETENCY VALIDATION**

Name: \_\_\_\_\_ Manager or Designee: \_\_\_\_\_  
 Work Area: \_\_\_\_\_ Primary Preceptor: \_\_\_\_\_  
 Hire Date: \_\_\_\_\_ Competency Date: Met \_\_\_\_\_ Not Met: \_\_\_\_\_

Reason for validation: ☐ Orientation ☐ Re-validation ☐ PI Follow-up ☐ Other \_\_\_\_\_

**Key:** 1 = No knowledge/No experience      3 = Knowledge/Done with assistance      **Circle method used for validation:** D = Demonstration    DR = Documentation Review    V = Verbalization  
 2 = Knowledge/No experience      4 = Knowledge/Done independently      T = Test/Quiz      O = Other (specify)

**Competency: Skin and Wound Care – Manages the care of patients with actual or potential alterations in skin integrity.**

Behavioral Indicators	Self Evaluation				Assessment Method	Validator's Signature/Date		Learning Resources	Comments
						Met	Not Met*		
Invasive Site Care									
1. Assesses invasive site for signs/symptoms of complications.	1	2	3	4	D, V			NPCS Orientation  <u>NPCS Policy:</u> Documentation, Patient  <u>NPCS SOP:</u> Pressure Ulcer Prevention for the “at risk” Patient	
2. Maintains cleanliness of invasive site and dressing.	1	2	3	4	D				
3. Instructs patient on proper care and observation of site.	1	2	3	4	D, V				
Skin Integrity									
1. Assesses patient for risk of skin breakdown.	1	2	3	4	D, DR			Oral Care for the Research Patient  Wound, Ostomy, Continence Nurse Service  Skin Assessment and Braden Scale Documentation  Experience with preceptor	
2. Keeps skin clean and dry with dressing changes and removal/containment of body fluids if applicable.	1	2	3	4	D				
3. Ensures frequent position changes for “at risk” patients.	1	2	3	4	D				
4. Identifies resources for specialized skin care needs of at-risk patients.	1	2	3	4	D, V				
5. Instructs patient or significant other in appropriate measures to prevent skin breakdown.	1	2	3	4	DR				
6. Provides oral care per NPCS guidelines.					D, DR				
7. Documents skin care issues per NPCS guidelines.	1	2	3	4	DR				

**Action Plan for Competency Achievement**

Targeted Areas for Improvement (Behavioral Indicators):


Educational Activities/Resources Provided:


“Hands on” practice planned with preceptor, unit educator, CNS, nurse manager:


Re-evaluation date: \_\_\_\_\_

By: \_\_\_\_\_

- ☐ Competency Met
- ☐ Competency Not Met

Next Step: \_\_\_\_\_